

Kerry

Site:	<u>Certain-Teed</u>
ID#:	<u>MO980631162</u>
Break:	<u>1.5</u>
Other:	<u>1-18-82</u>

MISSOURI DEPARTMENT OF NATURAL RESOURCES
P.O. Box 1368 1915 Southridge Drive Jefferson City, Missouri 65102 (314) 751-3241

January 18, 1982

Katie Biggs
EPA Region VII
324 East 11th Street
Kansas City, MO 64106


Dear Katie:

Enclosed is a copy of a memorandum of exposed asbestos waste on property previously operated by Certain-Teed Corporation. Apparently, this material became exposed as a result of the Metropolitan Sewer District (MSD) clearing brush prior to channelizing along Maline Creek.

You might want to include MSD in any remedial actions you may plan.

Please feel free to contact me at this office or Mike Duvall at the St. Louis Regional Office, (314) 849-1313, if you have any questions. Thank you for your cooperation in this matter.

Sincerely,


Lyle O. Crocker
Environmental Specialist
Waste Management Program

LOC/bki

cc: St. Louis Regional Office

Enclosure

07KF

30290366



Superfund

0400

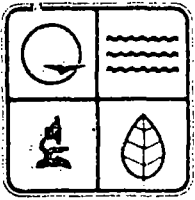
...ARHM/SWMG

JAN 20 1982

tion VII K.C., MO

Christopher S. Bond Governor
Fred A. Lafser Director

Division of Environmental Quality
Robert J. Schreiber Jr., P.E. Director



MISSOURI DEPARTMENT OF NATURAL RESOURCES

MEMORANDUM

Date: January 8, 1982
To: Art Groner, Central Office, Waste Management Program
From: ^{MD} Mike Duvall, St. Louis Regional Office
Subject: CERCLA Notification Site Inspection - Certainteed Corporation

Site Inspection report forms attached.

This site constitutes $\frac{1}{2}$ of the GAF-Certainteed Corporation asbestos waste pile project previously resolved by both U.S. EPA and our office. See enclosed letters dated April 28, 1980 and June 2, 1980 on this subject.

As noted on the form report, I observed during my most recent site visit that some exposed asbestos slag materials are now visible along the creek bank at the extreme NW corner of the area. These wastes became apparent over the past few months since some tree/brush clearing work started along the banks of Maline Creek preparatory to future channelization of the stream by MSD. The area in question is a relatively small part of the original closure project, and the decision was made during the plan review stage 2 years ago to leave it in an undisturbed state. This material is now subject to sloughing off with fluctuating stream flow and therefore poses some degree of concern. Any additional removal and/or stabilization actions here should probably be coordinated with the MSD.

To summarize, the vast majority of the asbestos waste pile has been satisfactorily stabilized, with the exception of the small area noted above.

MD/jk
Enclosure

SITE INSPECTION REPORT

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition (Section II). File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency; Site Tracking System, Hazardous Waste Enforcement Task Force (EN-J35), 401 M St., SW, Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME <u>CERTAINTEED CORP.</u>		B. STREET (or other identifier) <u>600 ST. CYR RD.</u>	
C. CITY <u>ST. LOUIS</u>	D. STATE <u>MO</u>	E. ZIP CODE <u>63127</u>	F. COUNTY NAME <u>—</u>

G. SITE OPERATOR INFORMATION 1. NAME <u>CERTAINTEED CORP.</u>		2. TELEPHONE NUMBER <u>(215) 542 0500</u>	
B. STREET <u>P.O. BOX 860</u>	4. CITY <u>VALLEY FORGE</u>	5. STATE <u>PA</u>	6. ZIP CODE <u>19482</u>

H. REALTY OWNER INFORMATION (if different from operator of site) 1. NAME <u>SAME</u>		2. TELEPHONE NUMBER <u>—</u>	
3. CITY <u>—</u>	4. STATE <u>—</u>	5. ZIP CODE <u>—</u>	6. TELEPHONE NUMBER <u>—</u>

I. SITE DESCRIPTION
ASBESTOS DISPOSAL AREA ON INDUSTRIAL TRACT

J. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE

II. TENTATIVE DISPOSITION (complete this section last)

A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, & yr.) <u>—</u>	B. APPARENT SERIOUSNESS OF PROBLEM <input type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input type="checkbox"/> 3. LOW <input type="checkbox"/> 4. NONE			
---	--	--	--	--

C. PREPARER INFORMATION		
1. NAME <u>—</u>	2. TELEPHONE NUMBER <u>—</u>	3. DATE (mo., day, & yr.) <u>—</u>

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION			
1. NAME <u>MIKE DUVAL</u>		2. TITLE <u>ENV. SPECIALIST</u>	
3. ORGANIZATION <u>MO DNR - ST. LOUIS REG.</u>		4. TELEPHONE NO. (area code & no.) <u>314 849 1313</u>	

B. INSPECTION PARTICIPANTS		
1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
<u>M. DUVAL</u>	<u>AS ABOVE</u>	

C. SITE REPRESENTATIVES INTERVIEWED (corporate officials, workers, residents)		
1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
<u>WM. BLAKESLEE</u>	<u>ENV. ENGINEER 215 542 0500</u>	<u>CERTAINTEED CO. - AS ABOVE</u>

D. GENERATOR INFORMATION (source of waste)

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
CERTAINTEED	CORP. - SEE PG. 1		ASBESTOS

E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED
N/A - ASBESTOS SLAG & SCRAP DEPOSITED IN PAST ON			
GROUND ADJACENT TO FACTORY BLDGS.			

F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS
N/A		

G. DATE OF INSPECTION (mo., day, & yr.)	H. TIME OF INSPECTION	I. ACCESS GAINED BY: (credential must be shown in all cases)
12-10-81	3:30 PM	<input checked="" type="checkbox"/> 1. PERMISSION <input type="checkbox"/> 2. WARRANT

J. WEATHER (describe)

T ~ 40°F; PARTLY CLEAR; SLIGHT WIND

IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE	2. SAMPLE TAKEN (mark 'X')	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER			
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER (specify)			

NONE TAKEN

B. FIELD MEASUREMENTS TAKEN (e.g., radioactivity, explosivity, pH, etc.)

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS
N/A		

IV. SAMPLING INFORMATION

PHOTOS

1. TYPE OF PHOTOS

☒ a. GROUND ☒ b. AERIAL

2. PHOTOS IN CUSTODY

MO DNR - ST

UIS REG.

C. SITE MAPS

☒ YES. SPECIFY LOCATION OF MAPS:

CLOSURE PLAT

E. COORDINATES

1. LATITUDE (deg.-min.-sec.)

2. LONGITUDE (deg.-min.-sec.)

PART OF LOTS 3, 7, 8 OF U.S. SURV. 3, T46N 7E, ST. LOUIS CO., MO

V. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)☒ 2. INACTIVE (Those sites which no longer receive wastes.)

3. OTHER

(Those sites which include such incidents like "midnight dumping" or continuing use of the site for waste disposal)

B. IS GENERATOR ON SITE?

☐ 1. NO☐ 2. YES (specify generator's four-digit SIC Code):

N/A - PAST DISPOSAL PRACTICE! COMP. RELOCATED

C. AREA OF SITE (in acres)

~15

D. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO☒ 2. YES (specify):

FACTORY BLDGS.

VI. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking an 'X' in the appropriate boxes.

X	A. TRANSPORTER	X	B. STORER	X	C. TREATER	X	D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION		1. LANDFILL
	2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE		3. DRUMS		3. VOLATILE EXTRACTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECOVERY/RECOVERY		4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. TANK, BELOW GROUND		5. CHEMICAL TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (specify):		6. OTHER (specify):		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE REPROCESSING		7. UNDERGROUND INJECTION
					8. SOLID RECOVERY		8. OTHER (specify):
					9. OTHER (specify):		

E. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this form.

☐ 1. STORAGE☐ 2. INCINERATION☒ 3. LANDFILL☐ 4. SURFACE IMPOUNDMENT☐ 5. DEEP WELL☐ 6. CHEM/BIO/PHYS TREATMENT☐ 7. LANDFARM☐ 8. OPEN DUMP☐ 9. TRANSPORTER☐ 10. RECYCLOR/RECLAIMER

VII. WASTE RELATED INFORMATION

A. WASTE TYPE

☐ 1. LIQUID☒ 2. SOLID☐ 3. SLUDGE☐ 4. GAS

B. WASTE CHARACTERISTICS

☐ 1. CORROSIVE☐ 2. IGNITABLE☐ 3. RADIOACTIVE☐ 4. HIGHLY VOLATILE☒ 5. TOXIC☐ 6. REACTIVE☐ 7. INERT☐ 8. FLAMMABLE☐ 9. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc.

N/A

2. Estimate the amount (specify unit of measure) of waste by category, mark 'X' to indicate which wastes are present.

a. SLUDGE		b. OIL		c. SOLVENTS		d. CHEMICALS		e. SOLIDS		f. OTHER	
AMOUNT		AMOUNT		AMOUNT		AMOUNT		AMOUNT		AMOUNT	
UNIT OF MEASURE		UNIT OF MEASURE		UNIT OF MEASURE		UNIT OF MEASURE		UNIT OF MEASURE		UNIT OF MEASURE	
<input checked="" type="checkbox"/> (1) PAINT, PIGMENTS		<input checked="" type="checkbox"/> (1) OILY WASTES		<input checked="" type="checkbox"/> (1) HALOGENATED SOLVENTS		<input checked="" type="checkbox"/> (1) ACIDS		<input checked="" type="checkbox"/> (1) FLYASH		<input checked="" type="checkbox"/> (1) LABORATORY PHARMACEUT.	
<input type="checkbox"/> (2) METALS SLUDGES		<input type="checkbox"/> (2) OTHER (specify):		<input type="checkbox"/> (2) NON-HALOGENATED SOLVENTS		<input type="checkbox"/> (2) PICKLING LIQUORS		<input checked="" type="checkbox"/> (2) ASBESTOS		<input type="checkbox"/> (2) HOSPITAL	
<input type="checkbox"/> (3) POTW				<input type="checkbox"/> (3) OTHER (specify):		<input type="checkbox"/> (3) CAUSTICS		<input type="checkbox"/> (3) MILLING/MINE TAILINGS		<input type="checkbox"/> (3) RADIOACTIVE	
<input type="checkbox"/> (4) ALUMINUM SLUDGE						<input type="checkbox"/> (4) PESTICIDES		<input type="checkbox"/> (4) FERROUS SMELTING WASTES		<input type="checkbox"/> (4) MUNICIPAL	
<input type="checkbox"/> (5) OTHER (specify):						<input type="checkbox"/> (5) DYES/INKS		<input type="checkbox"/> (5) NON-FERROUS SMELTING WASTES		<input type="checkbox"/> (5) OTHER (specify):	
						<input type="checkbox"/> (6) CYANIDE		<input type="checkbox"/> (6) OTHER (specify):			
						<input type="checkbox"/> (7) PHENOLS					
						<input type="checkbox"/> (8) HALOGENS					
						<input type="checkbox"/> (9) PCB					
						<input type="checkbox"/> (10) METALS					
						<input type="checkbox"/> (11) OTHER (specify):					

D. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (place in descending order of hazard)

1. SUBSTANCE	2. FORM (mark 'X')			3. TOXICITY (mark 'X')				4. CAS NUMBER	5. AMOUNT	6. UNIT
	a. SOLID	b. LIQ.	c. VAPOUR	a. HIGH	b. MED.	c. LOW	d. NONE			
ASBESTOS	<input checked="" type="checkbox"/>							RCRA # U013	?	?

VIII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.

☐ A. HUMAN HEALTH HAZARDS

☐ B. NON-WORKER INJURY/EXPOSURE☐ C. WORKER INJURY/EXPOSURE☐ D. CONTAMINATION OF WATER SUPPLY☐ E. CONTAMINATION OF FOOD CHAIN☐ F. CONTAMINATION OF GROUND WATER☒ G. CONTAMINATION OF SURFACE WATER

SOME SCRAP PIPE AND OTHER ASBESTOS-CONTAINING DEBRIS REMAINS EXPOSED ALONG SMALL STRETCH OF CREEK BANK AT NW CORNER OF SITE. THESE WASTE RESIDUALS WERE NOT ACCOUNTED FOR DURING PREVIOUS SITE STABILIZATION WORK, & BECAME VISIBLE AS A RESULT OF RECENT STREAM BANK VEGET. CLEARING PROJECT PREPARATORY TO FUTURE STORM CHANNEL IMPROVEMENTS OF MAINE CREEK BY THE

☐ H. DAMAGE TO FLORA/FAUNA☐ I. FISH KILL☐ J. CONTAMINATION OF AIR☐ K. NOTICEABLE ODORS☐ L. CONTAMINATION OF SOIL☐ M. PROPERTY DAMAGE

☐ O. SPILL/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

☐ P. SEWER, STORM DRAIN PROBLEMS

☒ Q. EROSION PROBLEMS

SEE SECT. G,

☐ R. INADEQUATE SECURITY

☐ S. INCOMPATIBLE WASTES

VIII. HAZARD DESCRIPTION (continued)

☐ T. MIDNIGHT DUMPING

☐ U. OTHER (specify):

IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE (specify units)
1. IN RESIDENTIAL AREAS	150	SAME	6	~ 130'
2. IN COMMERCIAL OR INDUSTRIAL AREAS	70	"	4	~ 30'
3. IN PUBLICLY TRAVELLED AREAS	SITE BORDERS MEDIUM USE COUNTY RD.			
4. PUBLIC USE AREAS (parks, schools, etc.)	NURSING HOME WITHIN ~ 350'			

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER (specify units) R,	B. DIRECTION OF FLOW R,	C. GROUNDWATER USE IN VICINITY NONE
D. POTENTIAL YIELD OF AQUIFER R,	E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure) INTAKE N/A - UPSTREAM	F. DIRECTION TO DRINKING WATER SUPPLY NE (UPSTREAM)

G. TYPE OF DRINKING WATER SUPPLY

☐ 1. NON-COMMUNITY < 15 CONNECTIONS
☒ 2. COMMUNITY (specify town): CITY ST. LOUIS - CHAIN OF ROCKS
☒ 3. SURFACE WATER
☐ 4. WELL
WTP ON MISS. RIVER

X. WATER AND HYDROLOGICAL DATA (continued)

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/buildings)	4. NON-COM- MUNITY (mark 'X')	5. COMMUN- ITY (mark 'X')
NAME KANAWA				

I. RECEIVING WATER

1. NAME

MALINE CREEK

☐ 2. SEWERS☒ 3. STREAMS/RIVERS☐ 4. LAKES/RESERVOIRS☐ 5. OTHER (specify):

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATER

- PROB. CLASS P

- LIMITED, IF ANY USAGE; TRANSVERSES METRO AREA FOR STORM DRAINAGE

XI. SOIL AND VEGETATION DATA

LOCATION OF SITE IS IN:

☐ A. KNOWN FAULT ZONE☐ B. KARST ZONE☐ C. 100 YEAR FLOOD PLAIN☐ D. WETLAND☒ E. A REGULATED FLOODWAY☐ F. CRITICAL HABITAT☐ G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

A. OVERBURDEN	B. BEDROCK (specify below)	C. OTHER (specify below)
1. SAND		
X 2. CLAY - SILT		
3. GRAVEL		

XIII. SOIL PERMEABILITY

☒ A. UNKNOWN☐ B. VERY HIGH (100,000 to 1000 cm/sec.)☐ C. HIGH (1000 to 10 cm/sec.)☐ D. MODERATE (10 to .1 cm/sec.)☐ E. LOW (.1 to .001 cm/sec.)☐ F. VERY LOW (.001 to .00001 cm/sec.)

G. RECHARGE AREA

☐ 1. YES☐ 2. NO

3. COMMENTS:

P N/A

H. DISCHARGE AREA

☐ 1. YES☐ 2. NO

3. COMMENTS:

I. SLOPE

1. ESTIMATE % OF SLOPE

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.

3:1 MAX. AT EDGES TO W, GENERALLY FOLLOWING CRK. SLOPES STABLE.

J. OTHER GEOLOGICAL DATA

N/A

XIV. PERMIT INFORMATION

List all applicable permits held by the site and provide the related information.

A. PERMIT TYPE (e.g., RCRA, State NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, year)	E. EXPIRATION DATE (mo., day, year)	F. IN COMPLIANCE (mark 'X')		
					1. YES	2. NO	3. UNKNOWN
PREVIOUS NPDES # MO-0000108	U.S. EPA	MO-0000108	9-23-74	10-9-81	N/A		
-TERMINATED 10-9-81	MO DNR						

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

☐ NONE ☒ YES (summarize in this space)

MO DNR - ST. LOUIS REG. PREVIOUSLY WORKED WITH CERTAINTIED AND NEIGHBORING GAF CORP. TO ATTAIN SURFACE STABILIZATION OF ADJACENT, CONTIGUOUS ASBESTOS SLAG PILE.

REG. OFFICE HAS FILE HISTORY ON TOTAL PROJECT.

SITUATION BASICALLY RESOLVED TO MO DNR SATISFACTION THROUGH VOLUNTARY COMPLIANCE. SEE ALSO ATTACHED LETTER OF 6-2-80 FROM DNR TO COMPANY.

U.S. EPA HAD ALSO PREVIOUSLY ISSUED ADMINISTRATIVE ORDER TO COMPANY ON 2-26-79 TO CORRECT ASBESTOS PROBLEMS IN TERMS OF BOTH WASTE PILE AND WASTEWATER DISCHARGE.

SEE ATTACHED LETTER OF 4-28-80 FROM EPA TO COMPANY VERIFYING EPA APPROVAL OF CLOSURE ACTIONS TAKEN BY GAF. COMPLIANCE ATTAINED.

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition (Section II) information on the first page of this form.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

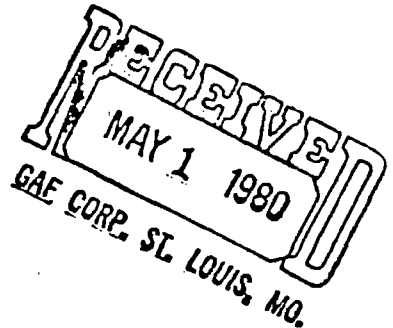
APR 28 1980

REGION VII
324 EAST ELEVENTH STREET
KANSAS CITY, MISSOURI - 64106

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Murray Sherman
Plant Manager, GAF Corporation
9215 Riverview Drive
St. Louis, Missouri 63137

COPY



Dear Mr. Sherman:

Docket No. VII-79-W-02

We have reviewed the actions taken by the GAF Corporation (GAF) in response to the Administrative Order issued on February 26, 1979. Each provision of the Order is discussed below:

Requirement 1: That GAF Corporation, 9215 Riverview Drive, St. Louis, Missouri cease discharging the toxic pollutant asbestos from outfall 002 and any other source under their authority contributing to the presence of asbestos in Maline Creek.

All discharges, including discharge 002, have been eliminated and all asbestos containing wastes have been isolated, thereby complying with this requirement. All necessary steps should be taken to insure that the asbestos containing wastes continue to be isolated in the future.

Requirement 2: That GAF Corporation comply with the sample collection procedures and reporting requirements of NPDES Permit No. MO 0000779.

This requirement became moot with the elimination of all point source discharges.

Requirement 3: That GAF Corporation comply with the sample collection and monitoring procedures for records keeping, permit limitations and reporting as required by NPDES Permit No. MO 0000779.

This requirement became moot upon termination of the NPDES discharge permit.

Requirement 4: That GAF Corporation remove asbestos contaminated material from the drainage ditch both upstream and downstream from discharge 002.

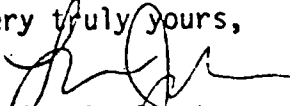
The asbestos contaminated materials were not removed from the drainage ditch upstream and downstream from discharge 002. However, our inspector concluded that all asbestos material had been covered and was no longer a threat to the environment. We consider this action to be satisfactory compliance with the Order as long as the cover is properly maintained.

Requirement 5: That GAF Corporation isolate asbestos contaminated material present in the waste piles on the facility site.

As noted above, all asbestos contaminated materials were found to have been effectively isolated.

The Environmental Protection Agency considers that you have satisfactorily complied with the terms of the Order and anticipates no further action in this matter.

Very truly yours,


Louise D. Jacobs
Director, Enforcement Division

cc: James P. Odendahl, Director
Division of Environmental Quality
Missouri Department of Natural Resources

C.F. Bien
GAF Corporation
1361 Alps Road
Wayne, New Jersey 07470



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

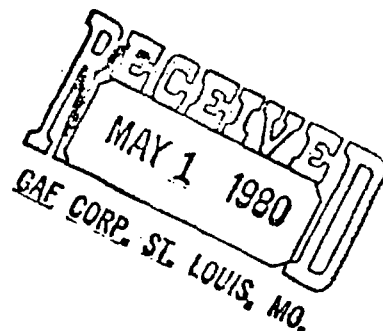
APR 28 1980

REGION VII
324 EAST ELEVENTH STREET
KANSAS CITY, MISSOURI - 64106

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RETURN RECEIPT REQUESTED

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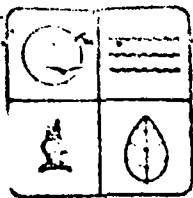
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Requirement 4: That GAF Corporation remove asbestos contaminated material from the drainage ditch both upstream and downstream from discharge 002.

The asbestos contaminated materials were not removed from the drainage ditch upstream and downstream from discharge 002. However, our inspector concluded that all asbestos material had been covered and was no longer a threat to the environment. We consider this action to be satisfactory compliance with the Order as long as the cover is properly maintained.



3,600 St. Louis County
GAF-Certainteed Company Asbestos Dump ✓

June 2, 1980

Mr. John P. McGinley
Vice President, Manufacturing
A-C Pipe Division
Certainteed Corporation
P.O. Box 860
Valley Forge, PA 19482

Dear Mr. McGinley:

This is to advise that we have completed our staff review of the project to stabilize the asbestos waste pile located at the Certainteed Corporation plant site in St. Louis County, Missouri.

The results of our latest inspection of the site conducted on May 13, 1980 confirm that the project has been completed in basic conformance with the approved plans and specifications as prepared by the consultant, Reitz & Jens, Inc. The inspector was satisfied that the necessary work has been accomplished in terms of the specified grading, covering and vegetative growth establishment provisions, as well as installation of the stream bank rip-rap and storm water drainage appurtenances. Verification of the closure plat to be filed with the County Recorder of Deeds Office has also been received in this office.

Based upon these determinations, it is our judgement that the Certainteed Corporation has taken the necessary actions to stabilize the asbestos waste pile and thereby restore the site to a condition in which it no longer poses a threat of contamination to the water or air resources of the state.

We again thank Certainteed Corporation personnel for their cooperation in resolving this matter in good order.

Sincerely,

Earl F. Holtgraewe, P.E.
Regional Administrator
St. Louis Regional Office
Department of Natural Resources

EFH/MD/dak

CC: Reitz & Jens, Inc.
Environmental Protection Agency, Region VII
Metropolitan St. Louis Sewer District
Central Office, Solid Waste Management Program

Joseph P. Teasdale Governor

Fred A. Lofser Director
St. Louis Regional Office

MISSOURI DEPARTMENT OF NATURAL RESOURCES
8460 Watson Road St. Louis, Missouri 63119 (314) 849-1313

LANDFILLS SITE INSPECTION REPORT

(Supplemental Report)

INSTRUCTION

Answer and Explain
as Necessary.

1. EVIDENCE OF SITE INSTABILITY (Erosion, Settling, Sink Holes, etc)

☒ YES ☐ NO SMALL STRETCH ALONG CRK. BANK HAS EXPOSED WASTES - SEE SECT. VII - WITHIN

2. EVIDENCE OF IMPROPER DISPOSAL OF BULK LIQUIDS, SEMI-SOLIDS AND SLUDGES INTO THE LANDFILL

☐ YES ☒ NO

3. CHECK RECORDS OF CELL LOCATION AND CONTENTS AND BENCHMARK

☐ YES ☐ NO

N/A

4. WASTES SURROUNDED BY SORBENT MATERIAL

☐ YES ☐ NO

N/A

5. DIVERSION STRUCTURES ARE EFFECTIVELY CONSTRUCTED AND PROPERLY MAINTAINED

☒ YES ☐ NO

6. EVIDENCE OF PONDING OF WATER ON SITE

☐ YES ☒ NO

7. EVIDENCE OF IMPROPER/INADEQUATE DRAINING

☐ YES ☒ NO

8. ADEQUATE LEACHATE COLLECTION SYSTEM (If "Yes", specify Type)

☐ YES ☐ NO

N/A

8a. SURFACE LEACHATE SPRING

☐ YES ☒ NO

9. RECORDS OF LEACHATE ANALYSIS

☐ YES ☐ NO

N/A

10. GAS MONITORING

☐ YES ☐ NO

N/A

11. GROUNDWATER MONITORING WELLS

☐ YES ☐ NO

N/A

12. ARTIFICIAL MEMBRANE LINER INSTALLED

☐ YES ☐ NO

N/A

13. SPECIFIC CONTAINMENT MEASURES (Clay Bottom, Sides, etc)

☒ YES ☐ NO

SEE # 16 BELOW

14. FIXATION (Stabilization) OF WASTE

☐ YES ☐ NO

N/A

15. ADEQUATE CLOSURE OF INACTIVE PORTION OF FACILITY

☒ YES ☐ NO

16. COVER (Type)

CLAY - SILT SOILS WITH SECURE VEGET. GROWTH

16a. THICKNESS

12" MIN. CAP OVER ENTIRE SITE

16b. PERMEABILITY

N/A

16c. DAILY APPLICATION

☐ YES ☐ NO

N/A